COMBINED DECLARATION FOR UTILITY OR DESIGN PATENT					NEY'S DOCKET 328USw
APPLICATION WITH	APPLICATION WITH POWER OF ATTORNEY			First Nar	nes Inventor:
					Tolar MARTIN ete if known:
				App No	
() Declaration submitted with initial f	iling or			1	
() Declaration submitted after initial:	filima (avnahanaa n	aguired 27CED 1 16(a))		Filing l	Doto
Declaration submitted after initial	nning (surcharge r	equired 3/CFR1.16(e))		Filing	Date
				Group	Art Unit:
As below named	inventor. I here	by declare that:		.l.,	
My residence, post office	address and citiz	zenship are as stated belo	ow next to my name.		
			e is listed below) or an original, fairmed and for which a patent is so		
	PREPA	ARATION OF CHEMI	ICAL COMPOUNDS		
the specification of which	(check only one	item below):			
[]is attached hereto. OR					
[X] was filed on 25 June 2004 as United States application Serial No or PCT International					
Application Number <u>PCT</u> applicable)	<u>r/US2004/02035</u>	53 filed and was amende	ed on (MM/DD/YYYY)		(if
I hereby state that I have r as amended by any amend			the above-identified specification	ı, includir	ng the claims,
I acknowledge the duty to	disclose informa	ation which is material to	o patentability as defined in 37 C	FR §1.56	•
I hereby claim foreign priority bene inventor's certificate or 365(a) of ar States of America, listed below and certificate or of any PCT internation	ny PCT internati have also ident nal application h	onal application which of ified below, by checking naving a filing date before	designated at least one country of the box, any foreign application to that of the application on which	her than t for paten	he United t or inventor's
PRIOR FOREIGN AND ANY PI					
Prior Foreign Application Number (s)		Country	Foreign Filing Date (MM/DD/YYYY))		PRIORITY CLAIMED
1.					
2.					
3. 4.					
5.					
I hereby claim the benefit under Tit	tle 35, United St	ates Code §119(e) of an	y United States provisional applie	cation(s)	listed below:
Application No.			e (MM/DD/YYYY)		
1. 60/483,002			6/27/2003		
2.					
3.					

COMBINED DECLARATION FOR UTILITY or DESIGN PATENT APPLICATION WITH POWER OF ATTORNEY Continued

PRIOR U.S. PARENT APPLICATION or PCT PARENT APPLICATION

ATTORNEY'S DOCKET NUMBER
PR60328USW

I hereby claim the benefit under 35, U.S.C. §120 of any United States application or §365(c) of any PCT international application designating the United States of America that is listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. §112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 C.F.R. §1.56 which became available between the filing date of the prior application(s) and the national or PCT international filing date of this application:

			STATUS (Check	one)
U.S. Parent Application or PCT Parent	Parent Filing Date	PATENTED	PENDING	ABANDONED
Number	(MM/DD/YYYY)			
POWER OF ATTORNEY: As a named inventor, I hereby appoint the practitioners associated with the Customer Numbers provided below to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith Customer Number 23347 and Customer Number 20462				
Address all correspondence and telephone calls to Customer Number 23347 Direct Telephone Calls to:				lls to:
David J. Levy			Daham	I CNATOTI
Corporate Intellectual Property				J. SMITH 183-8022
GlaxoSmithKline			1 919-4	183-8022
Five Moore Drive, PO Box 13398				•
Research Triangle Park, NC 27709-33	398			

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

	FULL NAME	FAMILY NAME	FIRST CIVEN NAME	SECOND GIVEN NAME/INITIAL
2	OF INVENTOR	MARTIN	Michael	Tolar
	INVENTOR'S	Signature	<u> </u>	Date:
	SIGNATURE			
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	CITIZENSHIP	Durham	NC	US
1	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
1	ADDRESS	GlaxoSmithKline	Research Triangle Park	North Carolina 27709, US
[Five Moore Drive, PO Box 13398	_	·
	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
2	OF INVENTOR	ROBERTS	John	Charles
	INVENTOR'S	Signature	***	Date:
İ	SIGNATURE			1
0	RESIDENCE &	СІТУ	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
ĺ	CITIZENSHIP	Durham	NC	US
	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
2	ADDRESS	GlaxoSmithKline	Research Triangle Park	North Carolina 27709, US
	<u></u>	Five Moore Drive, PO Box 13398	_	
	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
2	OF INVENTOR	TOCZKO	Jennifer	Fell
	INVENTOR'S	Signature ANNII		Date: OD C
	SIGNATURE			29 upto1
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	CITIZENSHIP	Durham	NC	US
	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
3	ADDRESS	GlaxoSmithKline	Research Triangle Park	North Carolina 27709, US
		Five Moore Drive, PO Box 13398		
	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
2	OF INVENTOR			<u> </u>
]	INVENTOR'S	Signature		Date:
	SIGNATURE			
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	CITIZENSHIP			
	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
4	ADDRESS			

COMBINED DECLARATION F	ATTORNEY'S DOCKET PR60328USw			
APPLICATION WITH POWER OF ATTORNEY			First Names Inventor:	
			Michael Tolar MARTIN Complete if known:	
			App No.:	
() Declaration submitted with initial filing or				
() Declaration submitted after initial filing (surcharge	required 37CFR1.16(e))		Filing Date	
			Group Art Unit:	
			·	
As below named inventor. I her	eby declare that:		-	
My residence, post office address and cit	izenship are as stated belo	w next to my name.		
I believe I am the original, first and sole is (if plural names are listed below) of the sentitled:	inventor (if only one name ubject matter which is clai	is listed below) or an original, fi med and for which a patent is so	irst and joint inventor ught on the invention	
PREP	ARATION OF CHEMIC	CAL COMPOUNDS		
the specification of which (check only on	e item below):		-	
[]is attached hereto. OR				
[X] was filed on 25 June 2004 as United States application Serial No or PCT International				
Application Number PCT/US2004/0203 applicable)	353 filed and was amende	d on (MM/DD/YYYY)	(if	
I hereby state that I have reviewed and us as amended by any amendment specifical		he above-identified specification	, including the claims,	
I acknowledge the duty to disclose inform	nation which is material to	patentability as defined in 37 C	FR §1.56.	
I hereby claim foreign priority benefits under 35 Univentor's certificate or 365(a) of any PCT international States of America, listed below and have also ider certificate or of any PCT international application	tional application which datified below, by checking having a filing date before	esignated at least one country of the box, any foreign application to that of the application on which	her than the United for patent or inventor's	
PRIOR FOREIGN AND ANY PRIORITY CL. Prior Foreign Application	Country	Foreign Filing Date	PRIORITY	
Number (s)	Country	(MM/DD/YYYY))	CLAIMED	
1.				
3.				
4.				
5.				
I hereby claim the benefit under Title 35, United S	States Code §119(e) of any	United States provisional application	cation(s) listed below:	
Application No.		(MM/DD/YYYY)		
1. 60/483,002	06	/27/2003		
3				

COMBINED DECLARATION FOR UTILITY or DESIGN PATENT APPLICATION WITH POWER OF ATTORNEY Continued

ATTORNEY'S DOCKET NUMBER
PR60328USW

I hereby claim the benefit under 35, U.S.C. §120 of any United States application or §365(c) of any PCT international application designating the United States of America that is listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. §112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 C.F.R. §1.56 which became available between the filing date of the prior application(s) and the national or PCT international filing date of this application:

PRIOR U.S. PARENT APPLICATION	or PCT PARENT APPLICATI	ON		
			STATUS (Check one)	
U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	PATENTED	PENDING	ABANDONED
POWER OF ATTORNEY: As a named inverse prosecute this application and to transact all but Customer Number 23347 and Customer Number 23347.	usiness in the Patent and Trademark C	rs associated with the Office connected therev	Customer Numbers vith	provided below to
Address all correspondence and telephone calls to Customer Number 23347 Direct Telephone Calls to:				alls to:
David J. Levy Corporate Intellectual Property GlaxoSmithKline Five Moore Drive, PO Box 13398 Research Triangle Park, NC 27709-3398				t J. SMITH 483-8022

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
2	OF INVENTOR	MARTIN	Michael	Tolar
-	INVENTOR'S	Signature	7	Date:
	SIGNATURE	who make the	<u> </u>	y ort, 2004
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	CITIZENSHIP	Durham	NC	US
İ	POST OFFICE	POST OFFICE ADDRESS	СПУ	STATE & ZIP CODE/COUNTRY
1	ADDRESS	GlaxoSmithKline	Research Triangle Park	North Carolina 27709, US
		Five Moore Drive, PO Box 13398		
	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
2	OF INVENTOR	ROBERTS	John	Charles
	INVENTOR'S	Signature		Date:
	SIGNATURE			
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	CITIZENSHIP	Durham	NC	US
	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
2	ADDRESS	GlaxoSmithKline	Research Triangle Park	North Carolina 27709, US
		Five Moore Drive, PO Box 13398		
	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
2	OF INVENTOR	TOCZKO	Jennifer	Fell
1	INVENTOR'S	Signature		Date:
1	SIGNATURE			
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	CITIZENSHIP	Durham	NC	US
	POST OFFICE	POST OFFICE ADDRESS	СПУ	STATE & ZIP CODE/COUNTRY
3 .	ADDRESS	GlaxoSmithKline	Research Triangle Park	North Carolina 27709, US
<u> </u>		Five Moore Drive, PO Box 13398		
	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
2	OF INVENTOR			
	INVENTOR'S	Signature		Date:
}	SIGNATURE			COUNTRY OF CITIZENSHIP
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CHIZENSHIP
	CITIZENSHIP			A RIN CODE/COLINTRY
	POST OFFICE	POST OFFICE ADDRESS	спу	STATE & ZIP CODE/COUNTRY
4	ADDRESS		<u> </u>	

COMBINED DECLAI APPLICATION WITH () Declaration submitted with initial () Declaration submitted after initial	H POWER OF A		PR603 First Nam Michael Comple App No	
As below named	d inventor. I hereby declar	re that:		
My residence, post office	e address and citizenship a	re as stated below next to my name.		
I believe I am the origina (if plural names are listed entitled:	al, first and sole inventor (in the subject man	f only one name is listed below) or an original ter which is claimed and for which a pate	ginal, first and jo ent is sought on th	int inventor le invention
	PREPARATIO	N OF CHEMICAL COMPOUNDS		
the specification of which	h (check only one item bel	ow):		
[]is attached hereto. OR [X] was filed on <u>25 Jun</u>	ne 2004 as United States ap	oplication Serial No or PC	T International	
Application Number PC applicable)	T/US2004/020353 filed a	and was amended on (MM/DD/YYYY) _		(if
as amended by any amen	dment specifically referred		,	g the claims,
I acknowledge the duty to	o disclose information whi	ch is material to patentability as defined it	n 37 CFR §1.56.	
inventor's certificate or 365(a) of a States of America, listed below an certificate or of any PCT internation	any PCT international appl d have also identified belo onal application having a f	9 (a)-(d) or §365(b) of any foreign application which designated at least one court, by checking the box, any foreign application or	ntry other than thication for patent	e United or inventor's
Prior Foreign Application			- - 1	22102111111
Prior Foreign Application Number (s)	Country	Foreign Filing (MM/DD/YY)		PRIORITY CLAIMED
1.				
2. 3.				
3. 4	<u>-</u>			
4. 5.				
	itle 35. United States Code	e §119(e) of any United States provisional	l application(s) li	sted helow:
Application No.	The second secon	Filing Date (MM/DD/YYYY)		stea below.
1. 60/483,002		06/27/2003		
2. 3.				
3.				

COMBINED DECLARATION FOR UTILITY or DESIGN PATENT APPLICATION WITH POWER OF ATTORNEY Continued

ATTORNEY'S DOCKET NUMBER
PR60328USW

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PRIOR U.S. PARENT APPLICATION of	or PCT PARENT APPLICAT	TION		
			STATUS (Check one)	
U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	PATENTED	PENDING	ABANDONED
POWER OF ATTORNEY: As a named inven prosecute this application and to transact all bus Customer Number 23347 and Customer Number	iness in the Patent and Trademark	ers associated with the Office connected there	Customer Numbers with	provided below to
Address all correspondence and telephone of David J. Levy Corporate Intellectual Property GlaxoSmithKline Five Moore Drive, PO Box 13398 Research Triangle Park, NC 27709-339		<u>347</u>		alls to: t J. SMITH 483-8022
I hereby declare that all statements made he	rein of my own knowledge are	true and that all state	ments made on inf	formation and haliaf

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
2	OF INVENTOR	MARTIN	Michael	Tolar
	INVENTOR'S	Signature		Date:
	SIGNATURE			
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	CITIZENSHIP	Durham	NC "	US
	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
1	ADDRESS	GlaxoSmithKline	Research Triangle Park	North Carolina 27709, US
<u></u>		Five Moore Drive, PO Box 13398	1	
	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
2	OF INVENTOR	ROBERTS	John	Charles
	INVENTOR'S	Signature		Date:
	SIGNATURE	Mm (Kalat		305ep04
0	RESIDENCE &	CyrY /	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	CITIZENSHIP	Dyrham	NC	US
	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
2	ADDRESS	GlaxoSmithKline	Research Triangle Park	North Carolina 27709, US
		Five Moore Drive, PO Box 13398		
	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
2	OF INVENTOR	TOCZKO	Jennifer	Fell
	INVENTOR'S	Signature		Date:
	SIGNATURE			
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	CITIZENSHIP	Durham	NC	US
	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
3	ADDRESS	GlaxoSmithKline	Research Triangle Park	North Carolina 27709, US
		Five Moore Drive, PO Box 13398		· ·
	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
2	OF INVENTOR	;		1
	INVENTOR'S	Signature		Date:
	SIGNATURE			
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	CITIZENSHIP			4
	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
4	ADDRESS			
				<u> </u>